## State of New Hampshire

Filed Date Filed: 02/01/2013 **Business ID: 686573** William M. Gardner Secretary of State

Filing fee:

\$50.00

Fee for Form SRA: \$50.00

Total fees \$100.00 Use black print or type.

Form LLC-1 RSA 304-C:31

## CERTIFICATE OF FORMATION NEW HAMPSHIRE LIMITED LIABILITY COMPANY

THE UNDERSIGNED, under the New Hampshire Limited Liability Company Laws submits the following certificate of formation:				
FIRST: The name of the limited liability company is Lamplighter Senior Services, LLC				
SECOND: The nature of the primary be modifications, improvements, and relate				
THIRD: The name of the limited liability company's registered agent is Gabriel Nizetic, Esq.				
and the <b>street address</b> , town/city (including zip code and post office box, if any) of its registered office is (agent's business address) 66 Highland Street, Plymouth, NH 03264				
FOURTH: The latest date on which the limited liability company is to dissolve isperpetual				
FIFTH: The management of the limited liability company <u>is</u> vested in a manager or managers.				
SIXTH: The sale or offer for sale of any ownership interests in this business will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B).				
*Signature:				
		Theodore R. Gadbois		
	Title:	Manager (Enter "manager" or "member"	<u> </u>	
and the second s		(Enter manager of member	) 	
To receive your ANNUAL REPORT REMINDER NOTICE by email, please enter your email address here: <a href="mailto:lamplighterservices@gmail.com">lamplighterservices@gmail.com</a> .				
*Must be signed by a manager; if no manager, must be signed by a member.				
DISCLAIMER: All documents filed with the public inspection in either tangible or elec	State of New Hampshire Form LLC 1 - Certificate of Formation 2 Page(s)			
Mail fees, <u>DATED AND SIGNED ORIGIN</u> North Main Street, Concord NH 03301-49		T1303535025	107 01. (1/2013)	

## Form SRA – Addendum to Business Organization and Registration Forms Statement of Compliance with New Hampshire Securities Laws

## Part I – Business Identification and Contact Information

Business Name: Lamplighter Senior Services LLC				
Business Address (include city, state, zip): 20 Meadowview Drive, Holderness, NH 03245				
Telephone Number: (603) 254-6111 E-mail	lamplighterservices@gmail.com			
Contact Person: Theodore R. Gadbois				
Contact Person Address (if different):				
Part II – Check <u>ONE</u> of the following items in Part II. If rejected. [PLEASE NOTE: Most small businesses registe II, Item 1 below. <i>However</i> , you must insure that your busin and C)]:	ring in New Hampshire qualify for the exemption in Part			
Hampshire because the business meets <u>ALL</u> o  A) This business has <b>10 or fewer owners</b> ; a  B) Advertising <b>relating to the sale of owne</b>	and			
2 This business will offer securities in New Hampshire under another exemption from registration or will notice file for federal covered securities. Enter the citation for the exemption or notice filing claimed -				
	This business has registered or will register its securities for sale in New Hampshire. Enter the date the registration statement was or will be filed with the Bureau of Securities Regulation			
4 This business was formed in a state other than New Hampshire.				
Part III – Check <u>ONE</u> of the following items in Part III:				
1 This business is not being formed in New Ham	pshire.			
2 This business <i>is</i> being formed in New Hampshire and the registration document states that any sale or offer for sale of ownership interests in the business will comply with the requirements of the New Hampshire Uniform Securities Act.				
Part IV – Certification of Accuracy				
(NOTE: The information in Part IV must be certified by: 1) <u>all</u> of the incorporators of a corporation to be formed; or 2) <u>an</u> executive officer of an existing corporation; or 3) <u>all</u> of the general partners or intended general partners of a limited partnership; or 4) <u>one or more</u> authorized members or managers of a limited liability company; or 5) <u>one or more</u> authorized partners of a registered limited liability partnership or foreign registered limited liability partnership.)				
I (We) certify that the information provided in this form is t	rue and complete. (Original signatures only)			
Name (print): Theodore R. Gadbois	Signature: MG 61 Sml			
	Date signed:			
Name (print):	Signature:			
	Date signed:			
Name (print):	Signature:			
	Date signed:			